

DEPARTMENT OF CONSUMER AND INDUSTRY SERVICES
BUREAU OF HEALTH SYSTEMS

ADMINISTRATIVE RULES FOR
SUBSTANCE ABUSE SERVICE PROGRAMS

PART 1: GENERAL PROVISIONS.

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PART 1. GENERAL PROVISIONS

R 325.14101 Definitions; A to D.

101 As used in these rules:

- (a) **"Act"** means Act No. 368 of the Public Acts of 1978, as amended, being §333.1101 et seq. of the Michigan Compiled Laws.
- (b) **"Administrative record"** means the formal written documents that record administrative actions of a governing authority, including minutes of meetings, resolutions, and guidelines.
- (c) **"Admission"** means the point at which an individual is formally accepted into a substance abuse service program and services are initiated.
- (d) **"Aftercare"** means the process of providing continued services to a client which support and increase the gains made during treatment.

- (e) **"Casefinding"** means the process of systematically interacting with the community for the purposes of identifying persons in need of services, alerting persons and their families to the availability of services, locating needed services, and enabling persons to enter the service delivery system.
- (f) **"Casefinding - organizational development"** means planned efforts designed to change specific community or organizational conditions so that the probability increases that persons with substance use problems will obtain appropriate treatment. The targets of organizational development activity are those various institutions and groups existing in each community which are not currently integrated into the substance abuse service delivery network.
- (g) **"Casefinding - screening and assessment, referral, follow-up" or "SARF"** means the performance of a range of activities necessary to make preliminary assessments of problems. The object of these activities, which may include interviews, psychological tests, and other diagnostic or assessment tools, is to effect referrals to appropriate treatment or assistance resources if indicated.
- (h) **"Detoxification treatment"** means a medically acute or subacute, systematic reduction of the amount of a drug in the body or the elimination of a drug from the body concomitant with supportive treatment services.
- (i) **"Discharge"** means the point at which the client's active involvement with a substance abuse service is terminated and the program no longer maintains active responsibility for services to the client.

R 325.14102 Definitions; F to Q.

102 As used in these rules:

- (a) **"Follow-up"** means activities designed to determine the present status of persons previously discharged by a program or referred by that program to services from another program.
- (b) **"Full time"** means employment of not less than 35 hours per week.
- (c) **"Inpatient care"** means substance abuse treatment services that are provided to persons within a hospital setting under medical supervision. Inpatient care may include both emergency services and non-emergency services.
- (d) **"Intimate parts"** means the primary genital area, groin, inner thigh, buttock, or female breast of a human being.

- (e) **"Maintenance treatment"** means the use of relatively stable dosages of the drugs methadone, levo-alpha-acetylmethadol (LAAM), or propoxyphene napsylate (Darvon-N) as oral substitutes for heroin or other morphine-like drugs for an individual dependent on heroin on a continuing basis for more than 21 days and in conjunction with the provision of appropriate rehabilitative social and medical services.
- (f) **"Methadone treatment"** means chemotherapy using the drugs methadone or LAAM (levo-alpha-acetylmethadol) as rehabilitation tools in conjunction with other treatment and rehabilitation care.
- (g) **"Outpatient care"** means scheduled, periodic care, including diagnosis and therapy, in a nonresidential setting. Correctional institutions are considered nonresidential settings.
- (h) **"Prevention"** means services that reduce the risk that an individual will develop problems which might require that he or she enter the substance abuse treatment system.
- (i) **"Prevention-alternatives"** means providing planned non-treatment personal growth activities which are designed to help a participant meet his or her own personal needs and to reduce his or her risk of developing problems which might require that he or she enter the substance abuse treatment system.
- (j) **"Prevention-CAIT"** means a prevention service that provides at least 1 of the following services:
 - (i) Community change.
 - (ii) Alternatives.
 - (iii) Information.
 - (iv) Training.
- (k) **"Prevention-community change"** means planned efforts which are designed to change specific conditions so as to reduce the probability that substance use problems will occur among residents of the community.
- (l) **"Prevention-information"** means providing information to the public which is designed to reduce the risk that an individual will develop problems which might require that he or she enter the substance abuse treatment system.
- (m) **"Prevention-problem assistance"** means helping a person with an acute personal problem involving or related to substance abuse to reduce the risk that the person might be required to enter the substance abuse treatment system.

- (n) **"Prevention-training"** means providing activities which are designed to improve the personal and social skills of a person who wishes to avoid substance use problems or who is in a position to help others avoid problems with substance use.
- (o) **"Program director"** means an individual who is appointed by the governing authority of the program or its authorized agent to act on its behalf in the overall management of the program.
- (p) **"Qualified handicapped,"** in relation to employment, means a handicapped person who, with reasonable accommodation, can perform the essential functions of the job in question. In relation to substance abuse services, **"qualified handicapped"** means a handicapped person who meets the eligibility requirements for the receipt of substance abuse services.

R 325.14103 Definitions; R to T.

103(1) As used in these rules:

- (a) **"Recipient"** means an individual who receives services from a licensed substance abuse program in the state of Michigan. "Client" is synonymous with "recipient" when used in these rules.
- (b) **"Recipient abuse"** means either of the following:
 - (i) An intentional act by a staff member which inflicts physical injury upon a recipient or which results in sexual contact with a recipient.
 - (ii) A communication made by a staff member to a recipient, the purpose of which is to curse, vilify, intimidate, or degrade a recipient or to threaten a recipient with physical injury.
- (c) **"Recipient neglect"** means that a recipient suffers injury, temporarily or permanently, because the staff or other person responsible for the recipient's health or welfare has been found negligent.
- (d) **"Residential care"** means substance abuse services that are provided in a full or partial residential setting. Such services may be supplemented with diagnostic services, counseling, vocational rehabilitation, work therapy, or other services which are judged to be valuable to clients in a therapeutic setting.
- (e) **"Sexual contact"** means the intentional touching, by a staff member, of the recipient's intimate parts or the intentional touching of the clothing covering the immediate area of the recipient's intimate parts, if that intentional touching can reasonably be construed as being for the purpose of sexual arousal or gratification.

- (f) **"Staff"** means an individual who is not a client and who works, with or without remuneration, for a licensed substance abuse program.
- (g) **"Substance abuse program"** means a public or private firm, association, organization, or group offering or purporting to offer specific substance abuse treatment, rehabilitation, casefinding, or prevention services. "Program" is synonymous with "substance abuse program" when used in these rules.
- (h) **"Substance"** means a chemical, including alcohol and other drugs, which, upon entering a human body, alters the body's physical or psychological status, or both.
- (i) **"Substantial violation"** means an infraction of a rule or of a provision of the act which is damaging to the intent of the rule or provision of the act and which may be evidenced by any 1 of the following:
 - (i) The violation is continuing, repetitive, intentional, or has proved damaging to specific clients.
 - (ii) The violation is likely to result in damage to clients.
 - (iii) The violation is likely to retard or prevent progress in client rehabilitation.
 - (iv) The violation does not closely conform to essential components of a rule.
- (j) **"Termination"** means the point at which the client's active involvement with a substance abuse service is discontinued by the program and the program no longer maintains active responsibility for services to the client.
- (k) **"Triage"** means the prompt evaluation of all incoming patients to determine the nature of the problem and the level of urgency, to identify the kind of service needed, and to assign for attention.

103(2) The terms defined in the act have the same meaning when used in these rules.

R 325.14104 Waivers of rules.

104(1) In addition to the specific cases cited, the administrator may grant waivers or variances of any of these rules for good cause shown.

104(2) A rule shall not be waived if such action would result in an activity which would endanger the health, safety, or welfare of a recipient.

104(3) A request for waiver shall be submitted by the program director to the administrator and local coordinating agency for review on forms provided by the office. The form shall be fully completed and signed by the program director.

- 104(4)** The administrator shall notify the originator of the waiver request and the coordinating agency in writing of the decision reached concerning each waiver requested.
- 104(5)** A waiver that is granted under this rule shall not be in effect longer than the program license. A request for extension of a waiver shall be made at the time of license renewal. The administrator may modify or revoke the waiver as a condition of renewal.

R 325.14105 Relationships with coordinating agencies.

- 105(1)** A program shall designate at least 1 staff member to act as liaison with the city or single- or multi-county coordinating agency which is established or designated for that program by the administrator.
- 105(2)** A program shall submit reports to the designated coordinating agency which are required in order for the coordinating agency to fulfill its responsibilities under the act.

R 325.14106 Reports.

- 106** A program shall furnish to the office all required regular and special reports necessary to implement the act and promulgated rules.

R 325.14107 Operating manual.

- 107** A program shall have an operating procedures manual which shall be clear and shall accurately reflect program activity. The governing authority of the program shall annually review the updating of the operating procedures manual. The operating procedures manual shall contain all of the following:
- (a) Intake procedure.
 - (b) Admission criteria.
 - (c) Discharge and termination criteria.
 - (d) Confidentiality procedures.
 - (e) Follow-up procedure after termination.
 - (f) Organizational structure.
 - (g) Incorporated status in the state of Michigan.
 - (h) Aftercare procedures.
 - (i) Recipient rights procedures.

R 325.14108 Hours of operation.

- 108** Hours of operation shall be posted.

R 325.14109 Governing authority.

- 109(1)** A program shall have a governing authority which has the authority and responsibility for the overall operation of the program and which shall ensure that the program complies with licensing standards. Program employees shall not serve as voting members of the governing authority.
- 109(2)** The governing authority shall adopt written bylaws and policies. The policies of the governing authority may be part of the bylaws or may be contained in a separate document. The bylaws or policies shall include all of the following:
- (a) The method of selecting members.
 - (b) The number of members.
 - (c) The terms of appointment or election of members, officers, and chairpersons of governing authority meetings.
- 109(3)** Governing authority meetings shall be held at least quarterly.
- 109(4)** Minutes of all governing authority meetings shall be kept and made available for inspection.
- 109(5)** The governing authority or its authorized agent shall appoint a program director whose authority and duties are defined in writing.

R 325.14110 Program director.

- 110** The program director shall be responsible to the governing authority or its authorized agent for the overall operation of the program.

R 325.14111 Program compliance with federal, state, and local statutes and regulations; provisions to assure that handicapped individuals receive services.

- 111(1)** In addition to the requirements of the act, a program shall comply with all federal, state, and local statutes, rules, and regulations that apply.
- 111(2)** Provision shall be made for assuring that qualified physically handicapped individuals are able to receive services. This assurance shall be provided by operating a barrier-free design facility or by developing a written plan which describes how comparable, alternative services can be made available to individuals with physical handicaps.
- 111(3)** Physical facilities shall be adequate for the specific type of service provided.

R 325.14112 Personnel management.

- 112(1)** A program shall have written personnel policies and procedures, including a description of the grievance process for employees who are charged with

conduct which might result in disciplinary action, including suspension or dismissal.

- 112(2)** The governing authority or its authorized agent shall give written approval to personnel policies and practices before their implementation. The date of such approval shall be documented.
- 112(3)** Personnel policies and practices shall be reviewed by the program director or his or her superior and, if necessary, updated at least annually.
- 112(4)** There shall be written job descriptions for all positions. Each job description shall specifically identify all of the following:
 - (a) Job title.
 - (b) Tasks and responsibilities.
 - (c) The skills, knowledge, training, education, and experience required for the job.
- 112(5)** Job descriptions shall accurately reflect the actual job situation and shall be revised when there is a change in the required qualifications, duties, supervision, or other job tasks.
- 112(6)** A staff member shall be given a copy of his or her written job description and a written description of the program's personnel policies and procedures.
- 112(7)** A program shall not refuse employment to individuals solely on the grounds of prior substance abuse or prior criminal history. A qualified handicapped person shall not be subjected to discrimination in employment on the basis of his or her handicap.
- 112(8)** There shall be an orientation program for all staff members to introduce them to the program's philosophy, goals, policies, and procedures.
- 112(9)** A personnel record shall be kept on each staff member.
- 112(10)** A staff member shall be evaluated at least annually, shall be encouraged to review and comment on the evaluation, and shall be asked to sign the evaluation to verify that he or she has been informed of the evaluation's contents.
- 112(11)** An appropriate staff member who is designated by the program director to be responsible for overseeing the operation of the program shall be physically on-site when the program director is absent.

R 325.14113 Program evaluation.

- 113(1)** Documentation of program evaluation methods that measure progress and results relative to current objectives shall be maintained by the program and shall be available for review by the office.
- 113(2)** A written statement of the program's measurable goals and objectives, developed as a result of a planning process, in conjunction with available information, shall serve as the basis for evaluation.
- 113(3)** A program shall develop a written evaluation plan based on the measurable goals and objectives of the program. The written evaluation plan shall be reviewed by the governing authority and updated at least annually.
- 113(4)** An annual evaluation progress report shall be prepared by a program. This report shall contain details on how the program intends to improve its performance in areas needing improvement.

R 325.14114 Staff development program.

- 114(1)** A program director shall be responsible for the establishment of a staff development program. The program shall include all of the following:
 - (a) Orientation for entry level staff.
 - (b) On-the-job training.
 - (c) Inservice education.
 - (d) Opportunity for continuing job-related education.
- 114(2)** A program shall develop written policies and procedures which specify what the staff development program is comprised of and how it operates. These policies and procedures shall be made available to all program staff and shall be available for review by the office.
- 114(3)** A record shall be kept of staff members who have participated in each staff development activity.

R 325.14115 Referrals to other resources.

- 115(1)** A program shall maintain a written list of resources which are willing and able to provide services to program service recipients. The list shall contain sufficient detail to allow a staff member making a referral to determine the name and location of the resource, the types of services the resource will provide, and the resource's criteria for determining an individual's eligibility for service.
- 115(2)** If a program is not part of a comprehensive mental health system, it shall enter into referral agreements with mental health facilities for provision of acute and long-term psychiatric services when necessary.

- 115(3)** An agreement shall exist between the licensee and 1 or more licensed medical service facilities for the provision of emergency inpatient and ambulatory medical services. If such a facility does not exist within 40 miles of the licensee's facility, an agreement shall exist between the licensee and a physician to provide emergency services.

R 325.14116 Confidentiality of client case records.

- 116(1)** A client's records shall be kept confidential and shall be maintained in compliance with section 6111 of the act and with other applicable federal and state statutes and rules, including the requirements of 42 C.F.R. §2.1 to 2.67-e, June 9, 1987. The provisions of 42 C.F.R. §2.1 to 2.67-e, June 9, 1987, are adopted by reference in these rules. Copies of the provisions of 42 C.F.R. §2.1 to 2.67-e, June 9, 1987, are available from the Superintendent of Documents, United States Government Printing Office, Washington, DC 20402, or from the Licensing Section, Office of Substance Abuse Services, 3423 N. Logan, P.O. Box 30195, Lansing, Michigan 48909, at no cost.
- 116(2)** An authorization for the release of information shall become part of the client's permanent case record.

R 325.14117 Discontinuation of substance abuse programs.

- 117(1)** The governing authority of a program shall adopt a written policy governing the disposal of client case records.
- 117(2)** A licensed substance abuse program shall, on forms provided by the office, notify the office and coordinating agency not less than 30 days before closure of a program.
- 117(3)** It is the responsibility of the governing authority to ensure that client records are properly disposed of pursuant to 42 C.F.R. §2.1 to 2.67-1, July, 1975.
- 117(4)** All clients who are still in treatment when a program discontinues its operations shall be notified of the date of closing, where they can obtain continued treatment, and how their records can be transferred to another program. They shall also be notified of the procedure to be followed if, after the program has closed, the client wants information contained in his or her record or wants the entire record transferred to another agency or person. Client consent forms shall be signed before such transfer of information.
- 117(5)** Programs shall obtain the approval of the pertinent regulatory agencies, such as the office of substance abuse services, the national institute on drug abuse, the state board of pharmacy, the federal food and drug administration, and the federal drug enforcement agency, before destruction of records.

- 117(6)** The governing authority of the program shall be responsible for destroying client files if arrangements for an appropriate transfer of files cannot be made.

R 325.14125 Rescission.

- 125** R 325.4001 to R 325.4084 of the Michigan Administrative Code, appearing on pages 2033 to 2049 of the 1979 Michigan Administrative Code, are rescinded.